Lesson 58 - Fasting Children During Disease

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1. Introduction

"He won't eat a thing, and I always fix him his favorite foods." The mother looked anxious as she told the Hygienic practitioner about her young son's refusal to eat

"And what does your child like?" the Hygienic doctor asked the woman

"Oh, you know, the usual things like ice cream, chocolate chip cookies, and lots of peanut butter sandwiches. He won't touch a fresh piece of fruit or any vegetables. I'd do anything to get him to eat. I always have his special food favorites around, but he just doesn't have any appetite for good foods. What should I do? I don't want him to starve."

"Leave your son with me and my wife for one week. When you return for him, you will not believe he is the same boy."

Reluctantly the woman left her young son with the Hygienist for six days. When she returned for him on the seventh day, the doctor showed her the boy happily eating a large raw vegetable salad with keen appreciation

"What did you do? How did you get him to eat like that?" the mother asked.

"Well, when he refused to eat the foods we provided him, we let him go without. After three days of not eating, he discovered that an apple or banana tastes pretty good."

"You mean you let my son go without food for three days?" The woman looked shocked. "That's cruel. That's child abuse."

"No madam," the Hygienic doctor replied. "Stuffing your child with junk foods and fretting over him constantly is child abuse. We just let nature take its course, and I might add, your son seems all the better for it."

Fasting a child or withholding food from an infant does seem like a cruel practice to some people. After all, the primary responsibility of parents is to provide sufficient food for their offspring. Not feeding a child seems like a drastic neglect of parental duty. A careful abstention from food for a limited period of time, however, may not only be beneficial but absolutely necessary for a youngster's health and well-being.

There are many questions and misconceptions about children and fasting. The purpose of this lesson is to answer these questions and remove the fears that surround the fasting of children.

1.1 Why Children May Need to Fast

Children usually need to fast for the same reasons that adults do. A fast is sometimes needed to give the body a total physiological rest so that it may rebuilt its health quickly. A controlled withdrawal of food for a reasonable period of time can allow the body to revitalize itself and to carry out the healing processes.

It is true that children are in a stage of rapid growth and physical development. During such a time, the demands by the body for high-quality food are great and must be met. But this does not mean that food must be always present or that overfeeding should be practiced.

Fasting is a time-honored method for improving the health of any person, regardless of age. Simply because a child has very definite needs for sustained and optimum nutrition does not mean that a fast for a reasonable length of time cannot be employed. Indeed, many times the child's body is better able to assimilate and utilize the food given following a fast than it was before the fast.

So, why should a child fast? For basically the same reasons that an adult may wish to fast: to achieve and maintain superior health and development by allowing the body a period of complete physiological rest (which includes a "rest" from the digestion and assimilation of foods).

1.2 When Should Children Fast?

According to Dr. Herbert M. Shelton, the world's foremost authority on fasting, children should not receive food when:

1. They are upset or feel bad.
2. They are excited or tired.
3. They are overheated or chilled.
4. They are in pain or distress.
5. They are sick or have a fever.

In other words, if a child is uncomfortable or disturbed in body or mind, then a meal should be postponed or skipped. Usually the simple missing of a single meal will often be enough to correct any temporary problem or passing illness of a child. This could hardly be called fasting, yet missing a meal can give the child's sensitive and vital body a chance to reestablish its normal balance and well-being.

Unfortunately, many parents become worried, nervous, and distraught if their child refuses to eat a meal. The idea of actually forcing their child to forego a meal seems almost unthinkable. Yet if there are signs of physical discomfort or disease, then abstaining from food for at least one meal is only sensible.

Missing more than one meal or going without food for over a day is the beginning of a fast. A fasting period of a day or more is advisable for most children during the time of illness and disease. In fact, most periods of childhood fasting coincide with the periods of childhood disease and illness.

An illness or sickness is proper enough reason for a child to fast, and the results from such fasting are nothing short of spectacular in rectifying physiological problems. In his book *The Hygienic Care of Children*, Dr. Shelton devotes many pages to the discussion of various diseases and illnesses suffered by children. This is the proper way to discuss the fasting of children, as it is during sickness that a fast should be employed.

2. Childhood Illness And Fasting

"Wise parents," wrote Dr. John H. Tilden (an early Hygienist), "will never feed their sick children. Be not afraid to let them fast. For, every day that they fast lessens their illness and their danger. Feeding adds to their suffering and danger and prolongs their illness."

Dr. Shelton also echoed these sentiments when he said: "Whenever animals, both young and old, become sick they instinctively refrain from eating. Warmth, quiet, and fasting, with a little water, are all they want. Infants, too, when sick require only warmth, quiet, and fasting, plus some water."

2.1 Specific Illnesses and Fasting for Children

Hygienic literature, and especially those books by Dr. Shelton, contains much practical advice about the care of children during illness. During almost any disease or illness of a child or infant, the basic requirements are the same: rest, fresh air, pure water when needed, warmth, and quiet. Fasting plays an important role in the child's recovery from sickness.

What follows in this section is a list of some of the common childhood illnesses and the suggested course of action by the parent in caring for the sick child.

2.2 Anemia

Anemia is a lack of red blood cells. "The value of a fast in all forms of anemia is beyond doubt. Children that have been allowed to develop anemia should be given a short fast—three to five days; older children longer—or a few days on orange juice and fed properly thereafter."

2.3 Rickets

Rickets are bone changes brought about by impaired nutrition. "Fasting has a beneficial effect in cases of rickets. Fasting properly done promotes growth. After a fast, an increase of body mass is accomplished which may have required years of normal growth."

2.4 Colds

A cold is a process of vicarious elimination. "For the 'common cold,' the child should be put to bed, all food stopped, except perhaps some orange juice (if there is no fever), and kept warm. That is all there is to the treatment of any so-called acute disease—rest, fasting, warmth. No cold can last long when the child is cared for in this manner."

2.5 Colic

Colic is digestive impairment of an infant. "The remedy for colic is: stop all feeding until comfort has returned."

2.6 Fever

Fever indicates poisoning; usually through decomposition in the intestines. "Fever will last until the poisons have been eliminated and the decomposing food voided. When such cases are fasted and not fed, the troubles end. Feeding and drugging are the elements of danger. When animals, *young or old*, become sick, they refrain from all eating."

2.7 Vomiting

In infants, vomiting is usually the first sign of acute disease. "Vomiting is a means of emptying the stomach before beginning housecleaning of the body. No food should be given the sick child."

2.8 Measles

Measles begin with a "head cold" and are accompanied by fever and malaise. "No food should be allowed until 24 hours after all acute symptoms are gone. Feeding should begin with fresh fruit juice, and then followed by fresh fruit the next day."

2.9 Whooping Cough

Whooping cough is a paroxysm of coughing. "Unless such a case is fasted, the coughing becomes more severe. The child should be given as much fresh air as possible and as much water as thirst calls for, but no food of any kind should be given until complete relaxation is secured (usually within three or four days). After full relaxation occurs, fruit juices may be given for two or three days, after which fresh fruit may be given. If the coughs tend to increase after meals, stop the feeding at once."

2.10 Mumps

Mumps are an inflammation of the salivary glands, especially the parotids. "Rest in bed with warmth until the temperature is normal and the swelling has gone. No food and no drugs should be given. If the child refuses to fast, orange or grapefruit juice may be used. After the swelling is gone, fruit may be fed three times a day for the first three days. After that, a gradual return to a normal and healthy diet may be done."

2.11 Diphtheria

Diphtheria is an inflamed and feverish throat condition. "Food must not be given until the throat is healed. Then fruit juices may be given for two days and then a gradual return to the normal diet. It is the fat, soft, 'well-fed' children who generally develop this sort of disease. I have never known a case of diphtheria in strict vegetarians on a low-protein diet."

2.12 Typhoid Fever

Typhoid fever is an acute disease involving mostly the small intestine. "When such patients are fasted, the stools and urine are pure by the time convalescence begins."

2.13 Tonsilitis

Tonsilitis is an inflammation of the mucous membrane. "In acute cases, all food should be withheld until the symptoms are gone. After this, a fruit diet should be given for three to five days. If the case is chronic, then a fast or orange or grapefruit diet may be employed until the throat is clean and breathing is easy."

3. The Mechanics Of Fasting

3.1 How Long Should Children Fast?

The most common question about children and fasting is: how long should the child fast?

A specific number of days cannot be given for all cases. Generally, a fast is conducted until all the symptoms of an acute illness subside. Chronic problems are sometimes handled by a series of fasts of varying lengths.

Most Hygienic practitioners, however, generally agree that children should not fast as long as adults may. That is, lengthy and extended fasts for children should be properly planned, supervised, and wisely considered. Short-term fasts for children, however, may be safely undertaken by knowledgeable parents.

To be more precise, Dr. Shelton tells us that he has seen very few cases of children or infants requiring an extended fast. "Fortunately," Dr. Shelton writes, "few infants require more than two to three days of fasting." In general, when nature cuts off the appetite of a child, he or she should be permitted to fast until there is a demand for food.

Dr. Shelton tells us that "infants may be fasted for days without harm, although they seldom have to fast as long as an adult." Infants and children, according to several Hygienists, recover more rapidly while fasting than do adults and so do not require to fast as long.

As a general guideline, Dr. Shelton and other Hygienic practitioners, seem to suggest that fasts for children be for periods of one to five days, with the time limits of two or three days being the most common length mentioned.

Once again, there can be no exact length for a fast in all cases. However, there is general agreement that since a child is usually less toxic and more vital than an adult, short-term fasts of one to three days are usually sufficient for most acute problems. Of course there may be circumstances and conditions that require a child to be fasted for longer than a three- or four-day period. Parents who are considering fasting their children for longer than a five-day period should probably consult a professional Hygienic practitioner.

Long-term fasts for children must be approached with caution. Not because fasting itself is dangerous, but because misinformed family, friends, or authorities may try to prevent such actions. In these cases, the support of a professional Hygienist can help the parent through any difficult times.

If you have no access to a practicing Hygienist, you may still fast your child without worry for short-term periods of one to three days. The exact length for a fast by a child or infant cannot be specified and depends upon the illness and the vitality of the youngster.

3.2 How to Fast Children

The needs of a child when fasting are basically the same as an adult's: warmth, quiet, rest, fresh air, and pure water. Fasting for short periods of time may be supervised by the child's parent. If a serious illness is present or if a fast must be conducted for more than several days, then the advice of an experienced Hygienist should be sought.

3.3 Beginning the Fast

No elaborate preparations are needed before a child is fasted. In cases of acute conditions where the symptoms of disease appear quickly, a fast may be begun immediately. In fact, as soon as there is a sign of serious illness in a child, the fast should start.

There is no need to give an enema to a child before the fast starts. If time and conditions permit, the child may be placed on an all-fruit diet for a day or so before the fast begins.

3.4 During the Fast

The child should be kept warm, comfortable, and quiet. He should not be permitted to play or exercise vigorously while fasting. It is more important that the child be allowed to rest totally while not eating. This allows the body's energy to be directed toward cleansing and detoxification instead of being expended in play or excitement.

Whenever the child is thirsty, distilled water at room temperature should be given. Do not force the child to drink excessively, but be sure that plenty of water is available for the child to drink. If the child is an infant, it may be given as much water from a bottle as it desires.

Fruit juices, such as orange or grapefruit juice, may be used if it is desired not to fast the child completely, or if the child refuses to drink only water. Drinking juices, however, is not a good idea since pure water is really all that is required by the fasting child. Dr. Shelton and other Hygienic practitioners, however, have used fruit juices when "fasting" children.

Particularly when no fever is present or no crisis is evident, fruit juices may be given to the child. Juice drinking or the eating of only fruits, however, do not constitute a true fast. For some cases, however, a diet of fruit juices or fruit only may be used with great benefits when fasting is impractical or not desired.

Placing the child on a strict diet of fresh fruits and freshly-squeezed juices can be done for an extended period of time and does not require the supervision of an experienced Hygienist. The benefits of this diet are enormous.

3.5 What to Expect During the Fast

During the fast, the child's urine may become dark. He may experience brief periods of diarrhea or constipation. The breath will probably smell foul and the tongue may become heavily coated. None of these signs are cause for worry, but indicate that the fast is progressing normally—that detoxification is being effected.

Once the fast begins, there is no need to worry about constipation or bowel movements. If none occur during the fast, do not worry because the child's regularity will return when the fast is broken.

Show no worry or concern with the fasting child. Do not let other adults' remarks about the "safety" of the fast, or demonstration of fears about the child's health affect you in any way. It is best to fast your child in private and without discussion, especially in front of the child. If fasting is treated as a normal part of living and if the parents also practice fasting as a regular part of a healthy lifestyle, then the child is more likely to view his own fast as a positive experience.

3.6 Breaking the Fast

The fast should be broken after all the acute signs of illness are gone, or the child experiences true hunger, or after a reasonable period (two to four days for an unsupervised fast). Hunger may be present during the first day of the fast. This is not a sign that the fast should be broken early, however: If the child expresses a strong desire to eat after the first day or two of the fast, that is a better indication that true hunger has returned and the fast should be ended.

Breaking the fast should be done carefully. Either a piece of fresh fruit or a small glass of fresh fruit juice may be given as the first food after the fast. Have the child sip the juice very slowly. If fruit is used, let the youngster have a single bite at a time and have him chew each bite very well.

A few/hours later, more juice or fruit may be given. Do not be in a hurry to introduce heavy foods back into the diet. As long as the child is happy and satisfied eating fruit alone, then allow him to continue with this diet. Gradually, fresh salads, nuts, and seeds may be introduced.

If the child is an infant or is still nursing, then the fast should be broken with mother's milk.

3.7 After the Fast

Following a fast, the child should be placed on the optimum Life Science diet. This consists primarily of fresh; raw fruits with raw vegetables, nuts, and seeds eaten in appropriate combinations. Of course if the child is very young, then mother's milk, fruit juices, blended fruits, and so on are appropriate.

Do not be in a hurry to overfeed or stuff the child with high-calorie foods in order to replace the lost weight. By no means should the child's natural appetite and hunger not be satisfied, but food should not be pushed onto the unwilling youngster.

After a fast is an ideal time to improve the youngster's diet. The fast provides an easy transition into better eating habits and food selection. The first days after a fast will find the child keenly appreciating the simple and natural foods in their uncooked state. This is an excellent time to include more and more fresh fruits and vegetables into the child's diet, and eliminate any substandard foods that may have been eaten prior to the fast.

3.8 Handling the Fears About Fasting Children

The greatest obstacle to fasting children will not be from the child but from overly-concerned parents and relatives. In some people's minds, fasting is the same as starvation and they worry needlessly about the child's safety during a fast.

A good education about the absolute safety of fasting children is necessary so that these fears can be eliminated.

When asked about the possible complications and difficulties that might result from fasting children, Dr. Shelton replied: "Complications result almost wholly from feeding and drugging. They almost never develop in cases that are not fed and not drugged. I have fasted numerous children and babies and it is my observation that they bear fasting well."

Still, there is often the worry that fasting will cause the child to lose loo much weight or it will be harmful to growth. In fact, the most common fear is that if food is withheld from an infant or child, it will lose weight and never regain its full growth potential. Such fears are groundless.

Dr. Shelton tells us that "it has been fully demonstrated that repeated short fasts of one to three days in growing animals produce better growth and strength. Children are not harmed by fasting, but only by starvation." And, I might add, children are harmed by eating when food should be foregone.

Fasting, properly done, can stimulate growth. Professor Morgulis, a researcher on fasting and animals, states that as soon as any animal, including man, loses weight through fasting, it then begins to gain at a spectacular rate once proper nourishment is again provided. "There is a rapid gain in weight," writes Professor Morgulis, "which is a manifestation of a vigorous growth process in animals after a fast.

There is prolific cell multiplication. Frequently, there is an increase in body mass that normally requires years of growth."

Dr. Shelton also remarks that he has seen periods of increased growth in children following a fast. It is not underfeeding or fasting that is to be feared, but rather overfeeding the child with improper foods.

Any weight loss experienced by the child on a fast will be quickly reversed once a diet of optimum foods is given after the fast is broken. The parents should simply make sure that the child has all the wholesome foods he wants or desires. His appetite will be hearty after a fast, and normal growth patterns

will be rapidly reestablished.

Perhaps the best reassurance a parent can have when fasting a child is to read about the thousands of youngsters who have been fasted by Hygienic practitioners. Dr. Herbert M. Shelton's book, *The Hygienic Care of Children*, provides many examples of the success obtained through fasting children. Parents may also contact other Hygienists who have fasted their children for their advice.

Unless the parents have a sympathetic listener, it would be best not to talk about the fasting of their children. Some people including medical doctors, have a mistrust of fasting and may actually take steps to prevent parents from fasting their children. These people often fill the parents with fear and guilt about fasting their offspring. In some cases, legal action has been taken against parents who were only trying to insure their children's health and well-being through fasting.

To avoid such complications, the wise parents will fast their child in private and without consulting various "authorities." Again, it is suggested that such parents try to contact other Hygienists for their support during the first fast for a child. Regardless, a short-term fast of one to three days can never do any harm and may be safely undertaken by any knowledgeable parent.

3.9 The Benefits of Fasting for Children

Children can quickly benefit from a fast, and it is encouraging to see the many positive results that occur so dramatically after a fast. Youngsters have vital and relatively clean bodies that respond well to a fast.

All the body's functions are normalized during a fast. Indigestion, constipation, headaches, colds, fevers, diarrhea, and a host of other childhood complaints often disappear quickly during a fast. The body can discharge its eliminative tasks much speedier during a fast.

Fasting also allows a child's weight to normalize. Overweight children will lose excessive pounds during a fast while underweight youngsters often quickly add pounds after a fast.

Fasting is an excellent way to introduce the child to a new diet, such as the optimum Life Science diet. In fact, many children can make dietary changes much easier than adults, and very often, they are easier to fast and, complain less.

Children, if old enough, should be carefully taught the benefits of fasting. They should be told or shown how animals fast naturally in the wild, and that fasting is a normal life process. Teaching your child how to fast properly is as important as teaching him to eat properly. Some parents find it easier to fast along with their children, and this is an excellent idea if conditions allow. Any fear of fasting that the child might have is quickly alleviated if the mother or father fasts as well.

Fasting is a time-tested method of insuring superior health for people of all ages, it should be employed by both young and old alike, and the fasting of children should be regarded as a safe and natural method of insuring superior health and vitality.

4. Questions & Answers

My child doesn't understand fasting. He thinks he is being punished when I put him on a fast. Help!

> If the child is old enough (around four years or so), he or she can understand what fasting is all about if you explain it in a general way. If you have any animals or pets, by all means

make it a point to assure your child how these creatures fast naturally during time of discomfort. If you can, you or your spouse should practice fasting in front of the child before he is put on a fast. Tell the child that when you are sick, your body and stomach must rest, so no food is eaten.

If the child is very young or is an infant, then you have little choice but to let the child fast and listen to his complaints. Actually, many children after the first day of the fast adapt very readily to not eating—moreso than adults.

It may seem cruel to you to deny a crying child his food, but if you are intent on furnishing him with superior health, then you will have to make this sacrifice.

The easiest way to handle this problem for a child past two or three is to let him see that fasting is a natural thing to do, and is not a punishment or something to be afraid of. Our culture promotes eating and overfeeding. You must show your child the other side of the coin, and develop good health habits at an early age.

The parent should set the example for the child and abstain from food too. In this way the child will be a participant rather than an outcast.

I want to fast our child, but my wife says no. None of our other relatives are sympathetic either. What should do?

In these cases, a compromise is necessary. Placing the child on diluted fruit juices or fresh fruit only will certainly allow the body to its work more efficiently than a conventional diet. While not as effective as a' fast, such a modified diet is often quite effective in the healing process.

Meanwhile, try to cooperate with your spouse. You yourself should fast to remove any fears about the process. Provide your relatives with information about fasting, such as this lesson, and seek out other parents who have had experience in fasting their children. Often a spoken word from another person who has fasted his or her children successfully will do much to allay your spouse's fears.

I have trouble knowing when to break my child's fast. She always says she is hungry, so that's not a good indication. How can I tell?

One rule is to never feed during a fever. If hunger is present at that time, it is usually a sign that liquids are needed—specifically, distilled water. You can generally ignore complaints about being hungry for the entire first day. If the child is very young, it is possible that true hunger could return as soon as the second or third day of the fast. If no major symptoms appear and the child indicates hunger by this time, then break the fast with fruit juices or fresh raw fruit. Continue feeding at this level for as long as possible. As long as the tongue is coated and the breath strong, the child will not evince true physiological hunger.

Article #1: Sick So Young, But Well At Last!

The Juliet Groll Story by Paulette Groll

Juliet was born December 7, 1979. She came into this world drug free (but within her first year of life this would drastically change), a beautiful, 7 lbs. 1 oz., full-term baby girl. We were thrilled! After nine years of marriage we finally had our baby girl.

Three days after her birth we were told we would have to leave Juliet in the hospital nursery because of a high bilirubin count. Reluctantly, but obediently, we agreed. Mother and daughter were separated long enough so it look days to reestablish breast-feeding.

After this episode I believed we were off to a great healthy beginning. This was until Juliet's "well-baby" checkups came along. Each one was more disturbing than before. "Her weight is still down." "She's so far off the (weight) graph she isn't even in the running." For months her legs did not rotate properly in the hip sockets. (This later corrected itself.) Her skin was pale and looked transparent. She was losing some gross motor movement. At six months the test for cystic fibrosis was just around the corner. Fortunately, this never happened. Our temporary "solution" to our daughter's weight problem was the magical "formula." Yes, her weight increased, but at the same lime, another more serious problem was on the horizon.

Juliet had an ear infection. The usual treatment was given—antibiotics. We thought nothing of it at the time. But what was to follow brought much thought and change into our lives.

From this first ear infection our journey down the long road of one ear infection after another began. Constant probing, ear "floodings," lab tests, hearing tests, along with ear drops and more antibiotics. A few months later came the ear "specialist" with more "specialized" equipment which terrorized our little girl. On one visit it took her mother, two nurses and the doctor to hold her still so the doctor could get a better look. As Juliet worsened, the medical visits out of town increased. A week without antibiotics and she had a roaring infection. Constant pain, illness, and exhausting examinations filled Juliet's life. For months we dumped antibiotic after antibiotic into her precious body. We ran the antibiotic gamut, then repeated them over and over.

At this point I was just learning about Natural Hygiene. Having followed the diet, along with weekly 24-hour fasts for eight months, we were considering (very cautiously) Natural Hygiene for Juliet. A Christian counselor friend had introduced me to Natural Hygiene. After years of therapy for depression, counseling, along with the principles of Hygienic living, brought me tremendous freedom and health. So, when he suggested trying mashed banana instead of formula, we decided to give it a try. This was the beginning of Juliet's introduction to the world of Natural Hygiene.

Now we found ourselves torn between the world of medicine and Natural Hygiene. A natural diet of raw fruits and vegetables, with nut butters was being topped off with antibiotics for dessert! We were told this long road of ear infections hopefully would come to an end—after surgery. Self-dissolving plastic tubes were to be placed through both eardrums. I asked to read the medical textbooks about this procedure but was put off. By this time Juliet's ears were bad and her hearing was minimal. We had no encouragement to resist. So, out of ignorance and desperation we allowed our 13-month-old to be hospitalized in January of 1981, and surgery was performed.

The surgeon told me, "We really like to feel justified in doing surgery on such a small child. In her case it was justified. The liquid behind her eardrums was like glue. If this doesn't work, there's nothing more we can do."

We really were hopeful. We wanted an end to all this misery for our daughter. And we thought that end had come until another ear infection came along. Then another. We were on the same journey down that

same long road again! Juliet was on "antibiotic row" until she developed a reaction to a common drug. Her body was covered in red blotches from her toes to her chin. She was given adrenalin. When still another antibiotic was prescribed, I declined. My only thought, "There just has to be another way."

Out With the Old, In With the New

My Christian counselor friend had recently told me about a place in Hollister, California, the California Health Sanctuary. He was going there to fast under the supervision of a Hygienic practitioner. I had been interested in going for myself. By now, my thoughts were on Juliet's immediate need. Could a one-year-old be fasted? We had many questions and concerns. With a feeling of nowhere else to turn, my husband and I made an appointment with the Hygienic practitioner at the California Health Sanctuary. Everything he said about the body's being able to heal itself, and that fasting provided the best environment to do so, made perfect sense. He explained that healing is a normal body process which goes on all the time in relation to the amount of energy available. During a fast, the body can save all the energy usually used in eating and other activities and use it to cleanse, repair, and restore itself. Juliet's body needed repair and restoration for sure. So, a week later, April 27, 1981, we arrived at the California Health Sanctuary to embark on a totally new experience.

I knew this would be a unique experience and began keeping a journal the first day. Mother and daughter would stay at the Sanctuary, while father and son returned home. We did not know how long this separation would be.

Juliet walked and played outside all afternoon. The Sanctuary is beautiful and perfect for a toddler to explore. We began getting to know the staff and other fasters. All around us was a spirit of love and sensitive caring. Juliet was given a bottle of distilled water. She always had her bottle close by whether for thirst or comfort. She quickly entered her fasting experience by vomiting a little on the second day. Her breath smelled of anesthesia, so did her body and diapers. As the fast progressed, her nose and ears drained and she had upper respiratory congestion. All this was her body's way of eliminating the poisons within.

While fasting, Juliet enjoyed being outside in her crib or going for long walks in her stroller. She would look up and give me her special smile as if to say, "I understand I'm getting well." It was a special time for both of us. We were totally together. I held her much and slept with her cuddled in my arms.

On day eleven of her fast I knew Juliet was on the road to recovery. Her symptoms were slowly lessening. Still, I was anxious. How much longer would she fast?

The most difficult part of Juliet's fast was not the fast itself, but others' reactions to us, as parents, fasting our child. Some of our dear friends (who knew us and trusted us) thought we had lost our minds. Many could not understand our new approach to health, and a few would not even respect our right to choose what we thought best for Juliet. But none had walked in our shoes. None of these people had been forced to seek a health alternative as we had been. How could they understand?

Yes, there were days I was tired and ready to go home, but the strength always came. God used all those at the Sanctuary in a beautiful way to give Juliet and me all that we needed to go on and see that her body was restored to health. My husband's support was invaluable. He didn't have the benefit of seeing firsthand Juliet's body healing itself. He had to rely on my secondhand information. Also, he did not have the fellowship of the Sanctuary people, those who already knew the healing that was and would continue to be taking place in our daughter. We were trusting the principles of Natural Hygiene through faith, not experience.

A Good Sign Appears!

Day twelve the drainage from Juliet's ears became "runny." This was a good sign! When It became like water and then stopped altogether the fast would be nearing a close. Day thirteen Juliet's ears drained

liquid but she was congested. This would have to clear before she was ready to break her fast. Day fifteen the director gave his first and only prediction as to approximately when Juliet would be ready to break her fast—two or three more days! I was excited until the next day when Juliet showed a lot of mucus, ear drainage, and congestion. As the fast came to a close (day eighteen) her breath was sweet, her body and diapers had no odor, her chest was clear with no drainage from her nose or ears. Her ears were healthy for the first time in nearly a year! Her eyes were bright; her face alert. Day nineteen came and Juliet was breaking her fast. She really ENJOYED her first fluid ounces of diluted, fresh-squeezed orange juice. It was a JOY for me to give it to her.

We stayed on at the Sanctuary while Juliet was gradually placed on a diet of raw fruits, vegetables, and nut butters in proper combinations and in modest amounts. Now, seventeen months old, she was also given bottles with freshly-prepared juices (apple, green leafy vegetables, and orange).

It was time to bring our daughter home. This was just the beginning of health for Juliet. She is twenty-six months old now and doing fine.

Try Natural Hygiene for yourself and your children. It's a great way to live!

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Article #2: The Hardest Thing to Do Is "Nothing" by Dr. V. V. Vetrano

"Poor baby, she's so sick. And look at her, she can barely lift her head!"

"Yes, it is true, she *is* sick and has a high fever. But don't worry, she's fasting and the fever won't last too long."

The first day went by without the in-laws saying too much, so I felt relieved. My husband thought I knew what I was doing and he didn't bother me too much about how I fed our baby. So I didn't have too much concern that he would stop me from fasting her.

The second day went by. All the family came to visit the baby. They were a little concerned. But when the third and fourth days had passed and the baby still had a fever, I really had to calm their fears. It was an unheard of thing, to fast a two-year-old baby. Everybody knows when babies have fever they need penicillin to knock it out. To refuse to see a medical doctor when a baby is ill is a crime, they say, and to fast a baby is even worse. ... it is sheer craziness. I'm surprised the family put up with my ways as well as they did. Perhaps I acted like I knew what I was doing or my faith in Natural Hygiene was so strong that it calmed their fears for a while, but on the fifth day of the child's fast even my husband panicked. He stormed out of the house saying, "If she isn't better by tomorrow, I'm taking her to a doctor."

I was just as concerned for my baby as they were, but to let my concern or lack of faith show would have been the end of her Hygienic care. I waited it out patiently, knowing that nature heals. I took her temperature daily, kept her warm, permitted her to rest quietly, and prevented people from smoking in the room, or from waking her up to see if she was alive. I kept the place quiet so she could sleep and do nothing else.

It's hard to buck the whole world, but it is even harder to sit back and wait for the day when a fever will drop. Every day you watch, listen, and hope. Infants that are fasting and who have fever are very quiet. They sleep a lot and this is also disquieting when you are a neophyte Hygienist and not a doctor. All sorts of fears enter your head.

"Is she okay?" you keep wondering. "Is she breathing?" "Is she still alive?" You are scared to death. You want to shake the child, or awaken it, or do just anything to reassure yourself that everything is fine. But I didn't do anything rash. I had to have patience and wait upon nature to complete her wonderful healing process. I was very worried, but I had faith in the living organism. Finally, her fever broke about mid-day on the fifth day of her fast, and there were sighs of relief all around. Her father was no longer tense and worried. The baby's great aunt was no longer hovering over her, wringing her hands. In fact, we all relaxed. That was the only time the baby was sick in her life. Thank goodness! I had weathered the storm. But I know how hard it is to sit and wait, and do absolutely nothing intelligently.

I am pleased I held out. I waited patiently for nature to heal my little baby. But others don't. Just recently, the parents of a six-month-old baby became frightened by their baby's symptoms. They called me, but instead of doing what I suggested they took the baby to the physician. They didn't want to fast the baby. This is when the trouble started. He insisted on all sorts of harmful and painful tests for the baby, including X rays. It takes so long to establish a diagnosis that, had the baby been cared for Hygienically, it would have been well long before the medical diagnosis was complete.

Finally, the physician began the treatment. They went to the physician simply to get a diagnosis. They couldn't forget about diagnosis and just fast the baby. They had to have a label. They were under the impression that if they just got a diagnosis and knew exactly what was wrong with the baby they wouldn't be so fearful. They just couldn't wait and rely on the natural healing powers of the body for their infant's recovery. They forgot all about the treatment that comes after the diagnosis. When they balked at the treatment, the physician became suspicious. He then insisted on the parents carrying out his orders. He even brought the authorities on the case, and the baby was held in the hospital against the parent's wishes. They were forced to submit to treatment of the baby. When they finally got the baby back home, they had to put up with the child abuse bureau visiting them twice a week to see that they were carrying out the physician's instructions regarding the care and feeding of the infant, and they were forced to begin feeding the child meat and cereals against their wishes. It took the infant six months to recover from the medical abuse called "diagnosis and treatments." All this trouble came about because the parents: had no faith in the living body to heal itself, and because of their inability to sit back and do absolutely nothing. "Doing nothing" intelligently is the hardest of all things to do.

Just the other night I was jolted out of my sleep by a ringing phone. It was a lady with a three-year-old baby. Deep concern, bordering on real fear, was in her voice. "I'm worried," she said, "my baby is so listless. There's no life in him at all and he has a fever of 104.5°F. I fasted him seven days and the fever went down. But he was very weak so I didn't wait the 24 hours necessary after the fever subsided. Now his fever has come back, and I'm really worried. I fed him only two ounces of orange juice three times, but his fever returned. He's so weak, and he's still sick." Her voice cracked, and she was crying.

I began asking her questions to try to discover how the child got sick and what the problem was. The baby had hidden himself on a back porch and had gotten into a dried dog food when the parents were visiting friends. When he was found, he was happily stuffing himself on the dried dog food, and had probably been doing so for about 15 or 20 minutes.

He developed a fever, a cough after that, and so the child was fasted. The parents were naturally very concerned and when the fever didn't come down in about three days, they became even more concerned. Many things went through their minds. Would the child survive? He had done this once before, but he had been discovered quickly enough to stop him before he had eaten very much. Under the stress of fear, and impatience, for the fever was still high, the baby was weak and getting weaker, and there was no sign of improvement, the parents decided that since the baby had not had a bowel movement, it would be best to give the child an enema. They reasoned that the dog food was an irritant and still in the colon, causing the temperature to remain high. "We must get rid of the irritant." So an enema was given. The child, however, was still even more listless and it did not bring the fever down.

The parents couldn't wait until the body rectified all the wrongs.

As the child had not vomited we know that the dog food was at least digested enough to pass from the

stomach to the small intestine. By the time it reached the colon, most of it had been digested. The preservatives, other poisonous chemicals, and decomposition products were absorbed from the small intestine. The time to have done something was when the child had first eaten the dog food. Vomiting could have been induced when the food was still in the child's stomach. But perhaps they did not realize just how much the child had eaten and the child was not yet sick. But, to give an enema after the food had already passed the absorbing area was useless and wasted the child's nerve energy. Had the material in the colon been a great enough irritant to cause fever, the body would have forced it out by a diarrhea.

The parent's reasoning was obfuscated because of the weakness and listlessness of the child. The tendency is to do something to make the child appear lively again. Parents forget that when nerve energy is being expended in one direction, it is withdrawn from another. It is normal when the body is fighting off poisons that all its energies, both nervous and physical, are directed to the area of the body that needs it most. The physical weakness comes because the blood and nerve supply has been withdrawn from the skeletal muscles of the body and directed inward to help rid the body of the poisonous substances. It is natural to be listless and weak under these conditions. However, seeing a listless child is frightening and there is that strong urge to do something, just anything, to see a manifestation of life to do nothing, I repeat, to do nothing, intelligently, at these times takes great courage and faith in the human organism.

Fevers may last for more than three days, when there is a need for it. Fasting, of course, is the quickest means to help the body rid itself of irritants that are occasioning the fever, but it sometimes takes more than three days. We must not panic if the fever does not subside more quickly. Children presently are developing fevers that last longer than in former decades. I have cared for several children recently and have noticed that the fevers seem never to quit. The children of this generation are not as strong as those of the previous generation, for many reasons. We will have to expect more acute illness and less robust, children until we clean up the environment and straighten out our method of growing and processing foods. The race is slowly but surely committing suicide.

Meanwhile, we must work in more harmony with nature than ever before. We must not needlessly cause the expenditure of any vital energy of any sick person, child or, adult. We must learn to conserve energy as we have never before conserved it, simply because there is less vitality and less functioning capacity than ever before.

If child or adult develops a fever, fasting is the best means for permitting the body to rid itself of the cause. The fever will never go as high when fasting as it does when feeding. "But," you ask, "what about brain damage if the fever should go up to 106°F?" Remember, first of all, that cells can function only at optimum temperatures. The minute the temperature goes up too high, the cells automatically cease functioning and the temperature spontaneously drops. Cellular metabolism contributes greatly to the rise in temperature, and when it is so hot that the cells can no longer function, metabolism slows down and automatically the temperature drops. Actually, it is the suppression of a fever by drugs and other measures causing retention of the poison, or the bacteria or whatever is the occasion for the fever, that damages the brain, never the fever per se. The fever is the necessary biological process to help the phagocytic cells eat up the bacteria or destroy and render nontoxic, the poisonous substance that may have been ingested. The drugs themselves are poisonous and only add to the load that the body has to eliminate. The drugs, plus the bacteria, and bacterial toxins and other poisons in the system are what damages the brain, not the fever which is only the body's best and speediest means of ridding itself of noxious agents.

No matter how hard it may be to sit and wait until the body heals itself, it is still the wisest thing to do.